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26986

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04/05/2007

MORRISS O'BRYANT COMPAGNI, P.C.
734 EAST 200 SOUTH
SALT LAKE CITY, UT 84102

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<u>Bau C. Oestreich</u>	(Depositor's name)
<u>[Signature]</u>	(Signature)
<u>04-30-07</u>	(Date)

05/04/2007 HDEHES2 00000078 10098104

01 FC:2501 700.00 OP
 02 FC:1504 300.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/765,371	01/27/2004	L. Alma Jessop	3764.CFS.NP	1573

TITLE OF INVENTION: CONCRETE FORM SYSTEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	07/05/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
SAFAVI, MICHAEL	3673	052-745090

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 MORRISS

2 O'BRYANT

3 COMPAGNI

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

CACTUS HOLDINGS, LLC

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

LEHI, UTAH

05/04/2007 HDEHES2 00000122 10765371

01 FC:2501
 02 FC:1504

700.00 OP
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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Date 04-30-07

Typed or printed name Paul C. Oestreich

Registration No. 44,983

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/765,371
		Filing Date	January 27, 2004
		First Named Inventor	L. Alma Jessop
		Group Art Unit	3673
		Examiner Name	SAFAVI, MICHAEL
Total Number of Pages in this Submission (including this sheet)	2	Attorney Docket No.	3764.CFS.NP

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief <input type="checkbox"/> Assignment with Cover Sheet <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Check for \$ 1,000 <input type="checkbox"/> Credit card authorization for \$ <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> Drawings __ sheets <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request __ month <input type="checkbox"/> Fee Calculation Table <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References <input checked="" type="checkbox"/> Issue Fee Transmittal	<input type="checkbox"/> Maintenance Fee Transmittal __ year <input type="checkbox"/> Missing Parts Response <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Revocation & Power of Attorney <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Other:	Remarks
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Attorney for Applicant	Paul C. Oestreich, Registration No. 44,632 MORRISS O'BRYANT COMPAGNI, P.C. 734 East 200 South Salt Lake City, Utah 84102 (801) 478-0071 telephone; (801) 478-0076 facsimile		
Signature			Date 04-30-07
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